

**MARTIN & FERRARO, LLP**  
14500 Avion Parkway - Suite 300  
Chantilly, Virginia 20151

Telephone  
(703) 679-9300

Facsimile  
(703) 679-9303

---

**FACSIMILE TRANSMITTAL**

---

**TO:**

**Name:** Examiner M. Priddy  
**Firm:** U.S. Patent & Trademark Office  
**Fax No.:** 703-872-9302  
**Subject:** U.S. Patent Application  
No. 09/970,294  
**Filed:** October 2, 2001  
**SCREWS OF CORTICAL BONE AND  
METHOD OF MANUFACTURE THEREOF**  
**Attorney Docket No.** 101.0070-02000  
**Customer No.** 22882

**FROM:**

**Name:** Thomas H. Martin, Esq.  
**Phone No.:** 703-818-3261  
**No. of Pages (including this):** 7  
**Date:** May 14, 2002

**Confirmation Copy to Follow:** No

FAX RECEIVED  
MAY 14 2002  
GROUP 3700

---

**Message:**

**CERTIFICATE OF TRANSMISSION UNDER 37 CFR 1.8**

I hereby certify that the attached Transmittal Form (in duplicate; \$90.00 additional claims fee charged to Deposit Account No. 50-1066) and Amendment with attachment are being facsimile transmitted to the U.S. Patent and Trademark Office on May 14, 2002.

  
Sandra L. Blackmon

If there is a problem with this transmission please call Sandy Blackmon at 703-818-3219 or the sender at the number above.

---

The information contained in this facsimile message is privileged and confidential information intended only for the use of the addressee listed above. If you are not the intended recipient or the employee or agent responsible to deliver this message to the intended recipient, please do not use this transmission in any way, but contact the sender by telephone.

FORM PTO-1083

Attorney Docket No.: 101.0070-02000  
Customer No. 22882

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Gary K. Michelson, M.D.

Serial No: 09/970,294

Filed: October 2, 2001

For: SCREWS OF CORTICAL BONE AND  
METHOD OF MANUFACTURE THEREOF

Art Unit: 3732

Examiner: M. Priddy

Assistant Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ No additional fee is required.
- ☐ Applicant hereby requests a \*\*\*month extension of time to respond to the above office action.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	45	-	40 **	5	LG=\$18 SM=\$0	\$18 \$ 90.00
INDEPENDENT CLAIMS FEE	3	-	3 ***	0	LG=\$84 SM=\$42	\$84 \$ 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$280 SMALL ENTITY FEE = \$140	\$ 0
TOTAL						\$ 90.00

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☒ A fee in the amount of \$90.00 to cover the additional claims fee is to be charged to Deposit Account No. 50-1066.
- ☐ A fee in the amount of \$\_\_\_ to cover the \*\*\*-month extension of time fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1066. A copy of this sheet is enclosed.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,  
MARTIN & FERRARO, LLP

Date: May 14, 2002

By: 

Thomas H. Martin

Registration No. 34,383

Attorney for Applicant

14500 Avion Parkway, Suite 300  
Chantilly, VA 20151-1101  
Telephone: 703-679-9300  
Facsimile: 703-679-9303